STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY **REAL ESTATE DIVISION**

2501 East Sahara Avenue, Suite 102 * Las Vegas, NV 89104-4137 * (702) 486-4033 e-mail: realest@red.state.nv.us

http://www.red.state.nv.us

EXPERIENCE VERIFICATION FOR A NEVADA REAL ESTATE LICENSE

FORM MUST BE COMPLETED BY VERIFYING BROKER OR DEVELOPER.

1.	Applicant's Name:						License Number: State of Issue:		
2.	2. Employment History: Full-time Part-time								
3.	Employment Dates :	from from from	m	onth	day	year	to to to	,	month day year
Multiple lines may be used for breaks in employment with same broker and company only.									
4.	Broker/Developer Declaration: I,								
	(Print name)	(Signatu					nature)		
	License number :								
5.	Notary Section: ss. STATE OF COUNTY OF This instrument was ach		ged befor		n		by_		(person presenting document)
	X					(seal	D)		
	X (Signature of Notario	al Office	r			_ (500)	-/		

Revised: 03/04/11 1 of 1 509